

ABOVE THIS LINE FOR DIVISION USE ONLY

NEW MEXICO OIL CONSERVATION DIVISION
 - Engineering Bureau -
 1220 South St. Francis Drive, Santa Fe, NM 87505



ADMINISTRATIVE APPLICATION CHECKLIST

THIS CHECKLIST IS MANDATORY FOR ALL ADMINISTRATIVE APPLICATIONS FOR EXCEPTIONS TO DIVISION RULES AND REGULATIONS WHICH REQUIRE PROCESSING AT THE DIVISION LEVEL IN SANTA FE

Application Acronyms:

- [NSL-Non-Standard Location]
 [NSP-Non-Standard Proration Unit]
 [SD-Simultaneous Dedication]
 [DHC-Downhole Commingling]
 [CTB-Lease Commingling]
 [PLC-Pool/Lease Commingling]
 [PC-Pool Commingling]
 [OLS - Off-Lease Storage]
 [OLM-Off-Lease Measurement]
 [WFX-Waterflood Expansion]
 [PMX-Pressure Maintenance Expansion]
 [SWD-Salt Water Disposal]
 [IPI-Injection-Pressure Increase]
 [EOR-Qualified Enhanced Oil Recovery Certification]
 [PPR-Positive]

SWD -1666
 Solaris Midstream LLC
 (OGRID 371643)
 Solaris Eddy State 2
 (30-015-44001)
 SWD; Devonian - 96101
 (SWD-1386)

- [1] **TYPE OF APPLICATION** - Check Those Which Apply for [A]
- [A] Location - Spacing Unit - Simultaneous Dedication
 NSL NSP SD
- Check One Only for [B] or [C]
- [B] Commingling - Storage - Measurement
 DHC CTB PLC PC OLS OLM
- [C] Injection - Disposal - Pressure Increase - Enhanced Oil Recovery
 WFX PMX SWD IPI EOR PPR
- [D] Other: Specify _____

- [2] **NOTIFICATION REQUIRED TO:** - Check Those Which Apply, or Does Not Apply
- [A] Working, Royalty or Overriding Royalty Interest Owners
- [B] Offset Operators, Leaseholders or Surface Owner
- [C] Application is One Which Requires Published Legal Notice
- [D] Notification and/or Concurrent Approval by BLM or SLO
U.S. Bureau of Land Management - Commissioner of Public Lands, State Land Office
- [E] For all of the above, Proof of Notification or Publication is Attached, and/or,
- [F] Waivers are Attached

[3] **SUBMIT ACCURATE AND COMPLETE INFORMATION REQUIRED TO PROCESS THE TYPE OF APPLICATION INDICATED ABOVE.**

[4] **CERTIFICATION:** I hereby certify that the information submitted with this application for administrative approval is **accurate and complete** to the best of my knowledge. I also understand that **no action** will be taken on this application until the required information and notifications are submitted to the Division.

Note: Statement must be completed by an individual with managerial and/or supervisory capacity:

Brian Wood		Consultant	12-31-16
Print or Type Name	Signature	Title	Date
		brian@permitswest.com	
		e-mail Address	

APPLICATION FOR AUTHORIZATION TO INJECT

I. PURPOSE: Secondary Recovery Pressure Maintenance XXX Disposal Storage
Application qualifies for administrative approval? Yes No

II. OPERATOR: SOLARIS MIDSTREAM, LLC

ADDRESS: 8901 GAYLORD, SUITE 210, HOUSTON TX 77024

CONTACT PARTY: BRIAN WOOD (PERMITS WEST, INC.) PHONE: 505 466-8120

III. WELL DATA: Complete the data required on the reverse side of this form for each well proposed for injection.
Additional sheets may be attached if necessary.

IV. Is this an expansion of an existing project? Yes XXX No
If yes, give the Division order number authorizing the project: _____

V. Attach a map that identifies all wells and leases within two miles of any proposed injection well with a one-half mile radius circle drawn around each proposed injection well. This circle identifies the well's area of review.

VI. Attach a tabulation of data on all wells of public record within the area of review which penetrate the proposed injection zone. Such data shall include a description of each well's type, construction, date drilled, location, depth, record of completion, and a schematic of any plugged well illustrating all plugging detail.

VII. Attach data on the proposed operation, including:

Solaris Eddy State 2
30-015-44001
SWD; Devonian

1. Proposed average and maximum daily rate and volume of fluids to be injected;
2. Whether the system is open or closed;
3. Proposed average and maximum injection pressure;
4. Sources and an appropriate analysis of injection fluid and compatibility with the receiving formation if other than reinjected produced water; and,
5. If injection is for disposal purposes into a zone not productive of oil or gas at or within one mile of the proposed well, attach a chemical analysis of the disposal zone formation water (may be measured or inferred from existing literature, studies, nearby wells, etc.).

*VIII. Attach appropriate geologic data on the injection zone including appropriate lithologic detail, geologic name, thickness, and depth. Give the geologic name, and depth to bottom of all underground sources of drinking water (aquifers containing waters with total dissolved solids concentrations of 10,000 mg/l or less) overlying the proposed injection zone as well as any such sources known to be immediately underlying the injection interval.

IX. Describe the proposed stimulation program, if any.

*X. Attach appropriate logging and test data on the well. (If well logs have been filed with the Division, they need not be resubmitted).

*XI. Attach a chemical analysis of fresh water from two or more fresh water wells (if available and producing) within one mile of any injection or disposal well showing location of wells and dates samples were taken.

XII. Applicants for disposal wells must make an affirmative statement that they have examined available geologic and engineering data and find no evidence of open faults or any other hydrologic connection between the disposal zone and any underground sources of drinking water.

XIII. Applicants must complete the "Proof of Notice" section on the reverse side of this form.

XIV. Certification: I hereby certify that the information submitted with this application is true and correct to the best of my knowledge and belief.

NAME: BRIAN WOOD

TITLE: CONSULTANT

SIGNATURE: _____

DATE: DEC. 29, 2016

E-MAIL ADDRESS: brian@permitswest.com

* If the information required under Sections VI, VIII, X, and XI above has been previously submitted, it need not be resubmitted.
Please show the date and circumstances of the earlier submittal: _____

III. WELL DATA

A. The following well data must be submitted for each injection well covered by this application. The data must be both in tabular and schematic form and shall include:

- (1) Lease name; Well No.; Location by Section, Township and Range; and footage location within the section.
- (2) Each casing string used with its size, setting depth, sacks of cement used, hole size, top of cement, and how such top was determined.
- (3) A description of the tubing to be used including its size, lining material, and setting depth.
- (4) The name, model, and setting depth of the packer used or a description of any other seal system or assembly used.

Division District Offices have supplies of Well Data Sheets which may be used or which may be used as models for this purpose. Applicants for several identical wells may submit a "typical data sheet" rather than submitting the data for each well.

B. The following must be submitted for each injection well covered by this application. All items must be addressed for the initial well. Responses for additional wells need be shown only when different. Information shown on schematics need not be repeated.

- (1) The name of the injection formation and, if applicable, the field or pool name.
- (2) The injection interval and whether it is perforated or open-hole.
- (3) State if the well was drilled for injection or, if not, the original purpose of the well.
- (4) Give the depths of any other perforated intervals and detail on the sacks of cement or bridge plugs used to seal off such perforations.
- (5) Give the depth to and the name of the next higher and next lower oil or gas zone in the area of the well, if any.

XIV. PROOF OF NOTICE

All applicants must furnish proof that a copy of the application has been furnished, by certified or registered mail, to the owner of the surface of the land on which the well is to be located and to each leasehold operator within one-half mile of the well location.

Where an application is subject to administrative approval, a proof of publication must be submitted. Such proof shall consist of a copy of the legal advertisement which was published in the county in which the well is located. The contents of such advertisement must include:

- (1) The name, address, phone number, and contact party for the applicant;
- (2) The intended purpose of the injection well; with the exact location of single wells or the Section, Township, and Range location of multiple wells;
- (3) The formation name and depth with expected maximum injection rates and pressures; and,
- (4) A notation that interested parties must file objections or requests for hearing with the Oil Conservation Division, 1220 South St. Francis Dr., Santa Fe, New Mexico 87505, within 15 days.

NO ACTION WILL BE TAKEN ON THE APPLICATION UNTIL PROPER PROOF OF NOTICE HAS BEEN SUBMITTED.

NOTICE: Surface owners or offset operators must file any objections or requests for hearing of administrative applications within 15 days from the date this application was mailed to them.

INJECTION WELL DATA SHEET

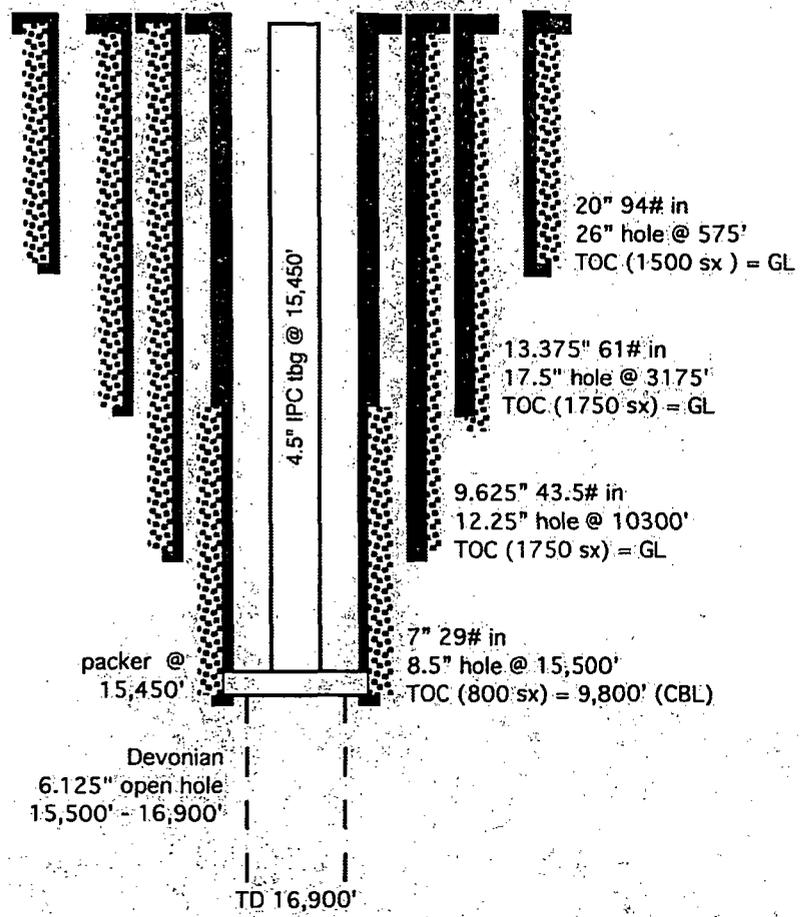
OPERATOR: SOLARIS MIDSTREAM, LLC

WELL NAME & NUMBER: SOLARIS EDDY STATE 2

WELL LOCATION: <u>2267 FSL & 2469 FWL</u>	<u>K</u>	<u>2</u>	<u>26 S</u>	<u>29 E</u>
FOOTAGE LOCATION	UNIT LETTER	SECTION	TOWNSHIP	RANGE

WELLBORE SCHEMATIC

(not to scale)



WELL CONSTRUCTION DATA

Surface Casing

Hole Size: 26" Casing Size: 20"
 Cemented with: 1500 sx. *or* _____ ft³
 Top of Cement: SURFACE Method Determined: CIRCULATE

Intermediate Casing

Hole Size: 17.5" Casing Size: 13.375" @ 3175'
12.25" 9.625" @ 10,300'
 Cemented with: 1750 sx. *or* _____ ft³
 Top of Cement: SURFACE Method Determined: CIRCULATE

Production Casing

Hole Size: 8.5" Casing Size: 7"
 Cemented with: 800 sx. *or* _____ ft³
 Top of Cement: 9,800' Method Determined: CBL
 Total Depth: 16,900'

Injection Interval

6.125" HOLE SIZE 15,500 feet to 16,900'

(Perforated or Open Hole; indicate which)

INJECTION WELL DATA SHEETTubing Size: 4.5" Lining Material: DUOLINE GLASSBOREType of Packer: NICKEL PLATED DOUBLE GRIP RETRIEVABLEPacker Setting Depth: ≈15,450'

Other Type of Tubing/Casing Seal (if applicable): _____

Additional Data1. Is this a new well drilled for injection? XXX Yes NoIf no, for what purpose was the well originally drilled? _____
_____2. Name of the Injection Formation: DEVONIAN3. Name of Field or Pool (if applicable): SWD; DEVONIAN (96101)4. Has the well ever been perforated in any other zone(s)? List all such perforated intervals and give plugging detail, i.e. sacks of cement or plug(s) used. NOT IN OTHER ZONES

5. Give the name and depths of any oil or gas zones underlying or overlying the proposed injection zone in this area: _____

OVER: DELAWARE 3175', BONE SPRING 6800', WOLFCAMP 11379'UNDER: NONE

SOLARIS MIDSTREAM, LLC
SOLARIS EDDY STATE 2
2267' FSL & 2469' FWL
SEC. 2, T. 26 S., R. 29 E.
EDDY COUNTY, NM

PAGE 1

30-015-44001

I. Plan is to drill a 16,900' deep commercial saltwater disposal well. Proposed disposal interval will be 15,500' - 16,900' in the SWD; Devonian (96101). See Exhibit A for map and Form C-102. (Project overlaps COG's canceled Reposado 2 State SWD 1 (SWD-1386). COG withdrew its APD on November 9, 2016.)

II. Operator: Solaris Midstream, LLC (OGRID # = 371643)
Operator phone number: (281) 501-3079
Operator address: 8901 Gaylord, Suite 210, Houston TX 77024
Contact for Application: Brian Wood (Permits West, Inc.)
Phone: (505) 466-8120

III. A. (1) Lease: New Mexico State Land Office lease VB-1487-0000
Lease Size: 320.00 acres (see Exhibit A for map and C-102)
Closest Lease Line: 373'
Lease Area: S2 Section 2, T. 26 S., R. 29 E.

Well name and number: Solaris Eddy State 2
Location: 2267' FSL & 2469' FWL Section 2, T. 26 S., R. 29 E.

A. (2) Surface casing (20", 94#) will be set at 575' in a 26" hole and cemented to surface with 1500 sacks (1875 cubic feet).

First intermediate casing (13.375", 61#) will be set at 3175' in a 17.5" hole and cemented to surface with 1750 sacks (4325 ft³).

Second intermediate casing (9.625", 43.5#) will be set at 10,300' in a 12.25" hole and cemented to surface with 1750 sacks (3550 ft³).

Liner (7", 29#) will be set from 9800' to 15,500' in an 8.5" hole and cemented to 9800' with 800 sacks (1250 ft³).

A 6.125" open hole will be drilled to 16,900' (TD).

SOLARIS MIDSTREAM, LLC
SOLARIS EDDY STATE 2
2267' FSL & 2469' FWL
SEC. 2, T. 26 S., R. 29 E.
EDDY COUNTY, NM

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- A. (3) Tubing (CLS 4.5" duoline 20 GlassBore® or its equivalent) will be set at $\approx 15,450'$. (Disposal interval will be 15,500' to 16,900'.)
- A. (4) A nickel plated double grip retrievable packer will be set at $\approx 15,450'$ (or $\leq 100'$ above the top of the open hole which will be at 15,500').
- B. (1) Disposal zone will be the Devonian (SWD; Devonian (96101) pool). Estimated fracture gradient is ≈ 0.65 psi per foot.
- B. (2) Disposal interval will be open hole from 15,500' to 16,900'.
- B. (3) Well has not been drilled. It will be drilled as a saltwater disposal well.
- B. (4) No perforated intervals are in the well.
- B. (5) Four existing wells are in the area of review. None penetrated the Devonian. Zones above the Devonian that have produced in Section 2 and the 8 adjacent sections are the Delaware (3175' - 6945'), Bone Spring (7000' - 8830'), and Wolfcamp (11,379' - 11,449'). No oil or gas zones are below the Devonian in the area of review.

IV. This is not an expansion of an existing injection project. It is disposal only.

V. Exhibit B shows the 4 existing wells (3 oil + 1 SWD) within a half-mile radius. Three of the wells are horizontal oil wells whose lateral is within $\frac{1}{2}$ mile even if the SHL is not. Exhibit C shows all 75 existing wells (38 oil or gas wells + 31 P & A wells + 5 disposal wells + 1 water well) within a two-mile radius.

Exhibits D and E shows all leases and lessors within a half-mile radius (only BLM and State) and two-mile radius (only BLM and State) leases. Details on leases within a half-mile follow.

SOLARIS MIDSTREAM, LLC
 SOLARIS EDDY STATE 2
 2267' FSL & 2469' FWL
 SEC. 2, T. 26 S., R. 29 E.
 EDDY COUNTY, NM

30-015-44001

Aliquot Parts in Area of Review (T26S, R29E)	Lessor	Lease	Lessee(s) of Record	Well Operator(s)
N2 Sec. 2	NMSLO	VB-1486-0000	COG	COG
S2 Sec. 2	NMSLO	VB-1487-0000	COG	COG
SENE Sec. 3	BLM	NMNM-013997	El Paso & Khody	none
E2SE4 Sec. 3	BLM	NMNM-096849	COG & Concho	none
NWNE & NENW Sec. 11	BLM	NMNM-011039	Carbon, Chevron, Exco, Green, Kerrco, Nu-Energy, & RKC,	none
NWNW Sec. 11	BLM	NMNM-121953	Chevron	none

VI. No well within 1/2 mile penetrated the Devonian (top = 15,500'). The closest (non-water) wells are:

API	WHO	UL 2-26s-29e	TVD	WELL	WELL TYPE	ZONE(S) DEVELOPED	FEET FROM SOLARIS EDDY STATE 2
3001540652	COG	C, F, K, N	8822	Reposado 3H	O	Bone Spring	623
3001536774	COG	B, G	8068	Reposado 1H	O	Delaware & Bone Spring	1179
3001539455	COG	A, H, I, P	8925	Reposado 2H	O	Delaware & Bone Spring	1803
3001532799	COG	C	6010	Tesuque 2 State 1	SWD	Delaware	2403
3001503724	Brown	A	3359	State 1	P&A	Delaware	3188

VII. 1. Average injection rate will be ≈20,000 bwpd.
 Maximum injection rate will be ≈25,000 bwpd.

SOLARIS MIDSTREAM, LLC
SOLARIS EDDY STATE 2
2267' FSL & 2469' FWL
SEC. 2, T. 26 S., R. 29 E.
EDDY COUNTY, NM

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2. System will be open. Water will be trucked.
3. Average injection pressure will be $\approx 3,000$ psi. Maximum injection pressure will be 3,100 psi ($= 0.2$ psi/foot $\times 15,500'$ (top open hole)).
4. Main source of disposal water will be water produced from Delaware, Bone Spring, and Wolfcamp wells - all of which produce in Section 2 or the 8 adjacent sections. Water from other Permian Basin zones could also be disposed. Water analyses from Go-Tech are in Exhibit F. TDS range from 65,466 to 235,300 (vs. 63,260 in a Devonian sample, also in Exhibit F). No compatibility problems have been reported from the closest (2-1/2 miles northwest) active Devonian disposal well (30-015-39470). The 4,657,204 barrels that have been disposed from 2012 to date include Delaware and Bone Spring waters.
5. No Devonian producer is within a ≥ 5 mile radius. An analysis of Devonian water is in Exhibit F.

VIII. The Devonian ($\approx 1,400'$ thick) disposal zone is dolomite. Closest possible underground source of drinking water above the proposed disposal interval is the Quaternary at the surface. No underground source of drinking water is below the proposed disposal zone. According to State Engineer records (Exhibit G), closest water well is 2.74 miles east. That well is 770' deep. However, a water well $\approx 2,500'$ southwest was found during an August 12, 2016 inspection.

Estimated formation tops are:

Quaternary = 0'
Salt = 800'
Delaware = 3100'
Bone Spring = 6800'
Devonian = 15,654'*
disposal interval = 15,500' - 16,900'
TD = 16,900'*
Devonian base = 16,143'*

* per e-mail from COG to OCD on 1-8-13. All disposal will be in the Devonian, no shallower than 15,500', and no deeper than 16,900'.

SOLARIS MIDSTREAM, LLC
SOLARIS EDDY STATE 2
2267' FSL & 2469' FWL
SEC. 2, T. 26 S., R. 29 E.
EDDY COUNTY, NM

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No water well is within a 1-mile radius according to State Engineer records (Exhibit G). However, one water well (Exhibit G) within a mile was found during an August 12, 2016 field inspection and sampled (Exhibit G). There will be >2 miles of vertical separation and the salt interval between the bottom of the only likely underground water source (Quaternary) and the top of the Devonian. Over 44,327,366 barrels of water have been disposed in the Devonian in 5 wells in Townships 25 and 26 South and Ranges 29 and 30 East.

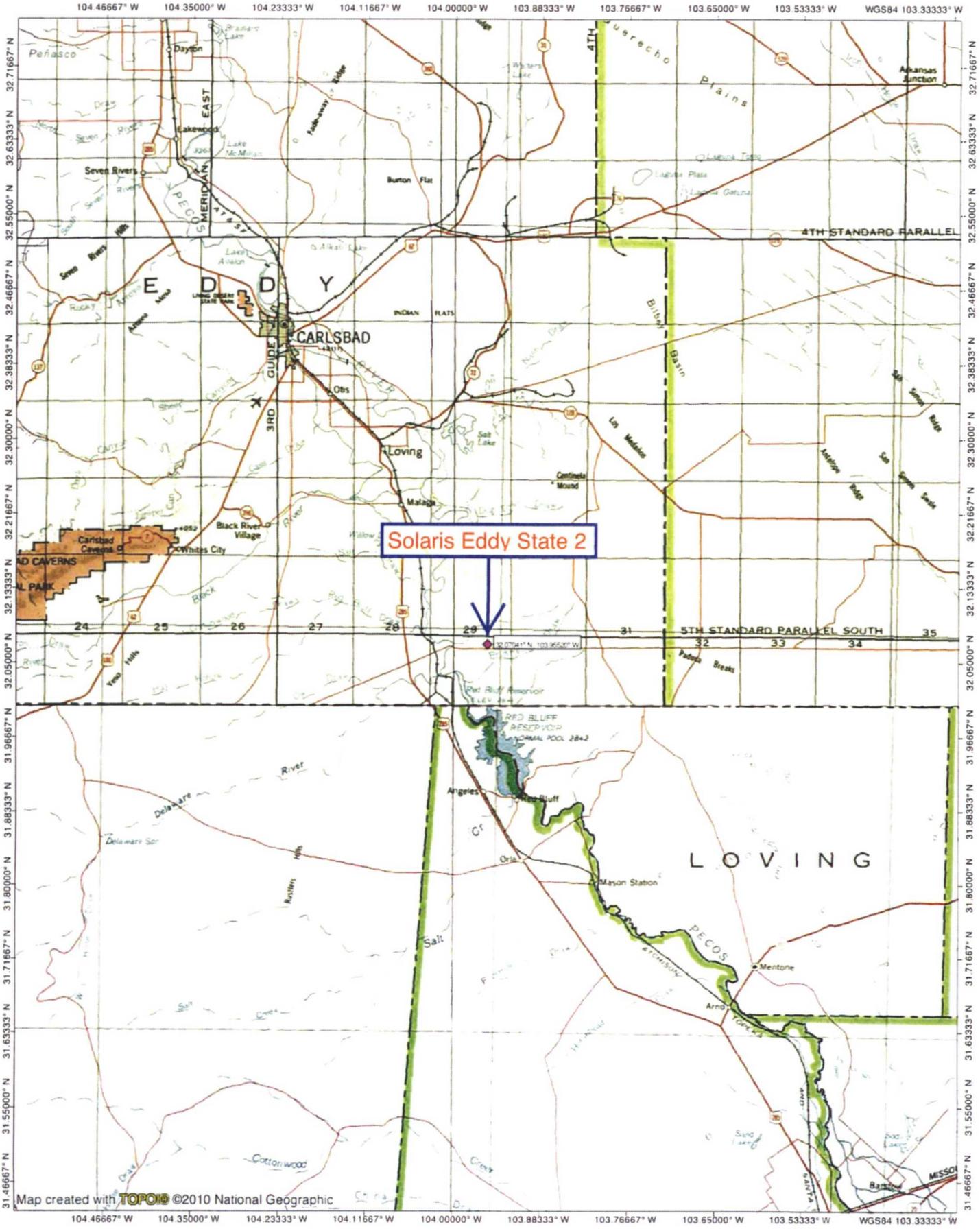
IX. The well will be stimulated with acid.

X. DLL, GR/N density, and CBL logs will be run.

XI. Based on an August 12, 2016 field inspection, one active water well is within a one-mile radius and it was sampled (Exhibit G).

XII. Closest Quaternary fault is \approx 55 miles southwest (Exhibit H). Based on a review (Exhibit H) by geologist David Entzminger, Solaris Midstream LLC is not aware of any geologic or engineering data that may indicate the Devonian is in hydrologic connection with any underground sources of water. Hundreds of feet of evaporites prevent that from occurring. Deepest water well within a 3-mile radius is 775' (Exhibit G). There are 145 approved Devonian saltwater disposal wells and 11 approved Devonian water injection wells in New Mexico.

XIII. A legal ad (see Exhibit I) was published on December 14, 2016. Notice (this application) has been sent (Exhibit J) to the surface owner (NM State Land Office), lessors (BLM & NMSLO), lessees of record (Carbon, Chevron, COG, Concho, El Paso, Exco, John Green, Kerrco, Khody, Nu-Energy, & RKC), operating rights holders (Chevron, COG, Concho, Costilla, Dominion, Exco, Khody, Three Forks, Charlotte Williamson), or well operators (COG) within a half-mile.



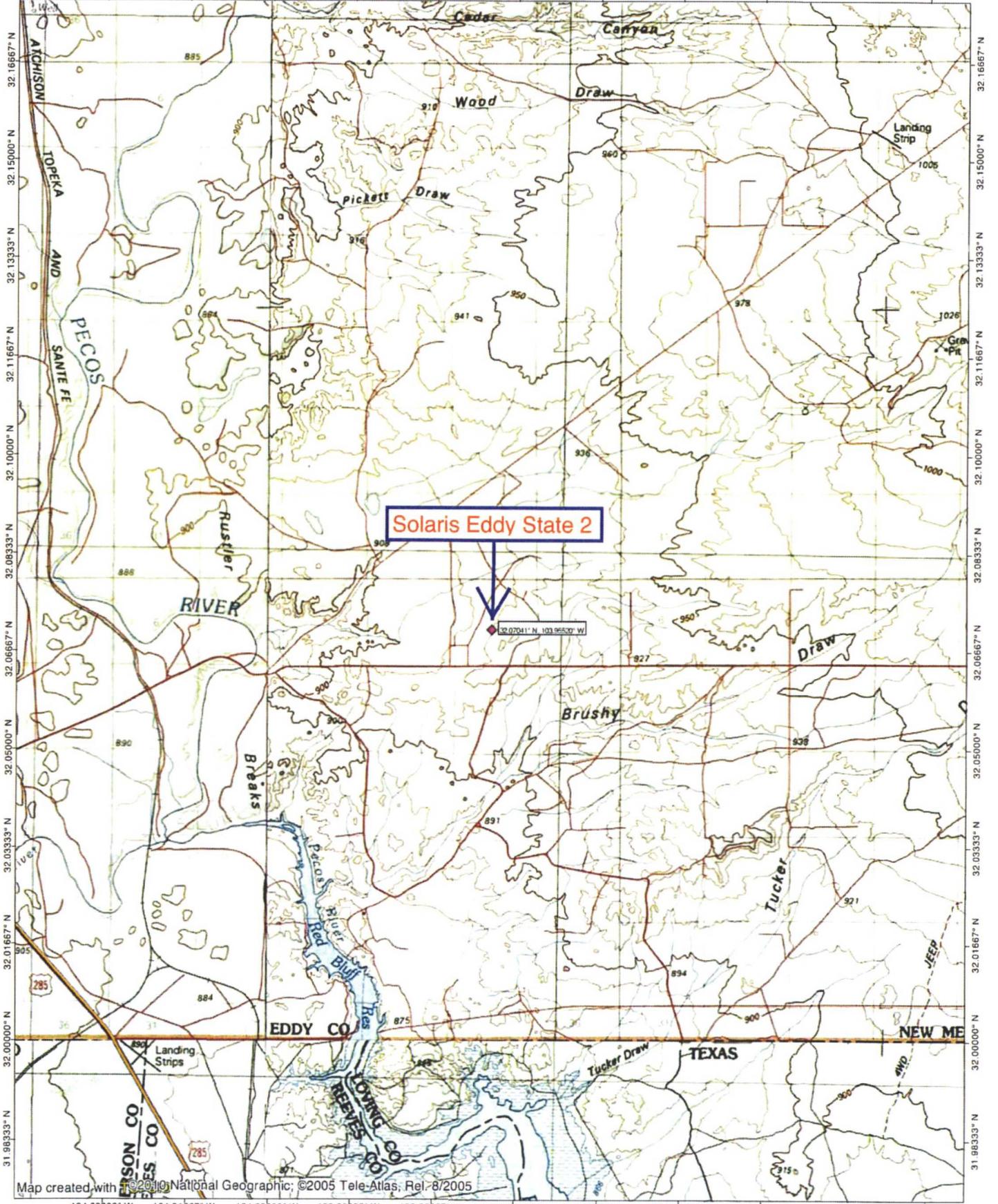
Map created with TOPO! ©2010 National Geographic



EXHIBIT A

TN+MN
7°
12/22/16

104.03333° W 104.01667° W 104.00000° W 103.98333° W 103.96667° W 103.95000° W 103.93333° W 103.91667° W 103.90000° W WGS84 103.86667° W



Solaris Eddy State 2



32.07041° N, 103.96530° W

Map created with ©2010 National Geographic; ©2005 Tele-Atlas, Rel. 8/2005

104.03333° W 104.01667° W 104.00000° W 103.98333° W 103.96667° W 103.95000° W 103.93333° W 103.91667° W 103.90000° W WGS84 103.86667° W



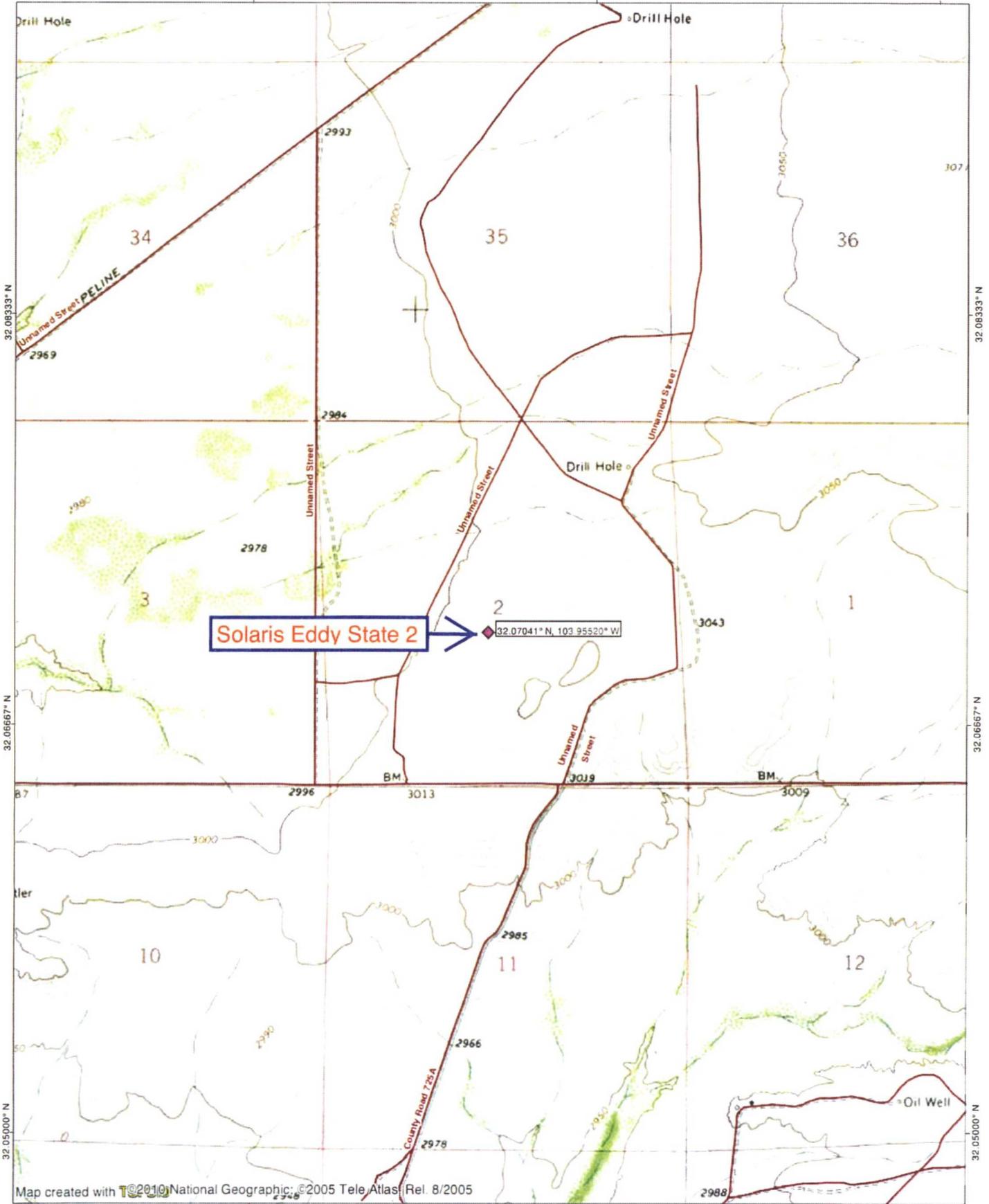
EXHIBIT A

TN & MN 7"

103.96667° W

103.95000° W

WGS84 103.93333° W



32.08333° N

32.06667° N

32.05000° N

32.08333° N

32.06667° N

32.05000° N

Map created with ©2010 National Geographic, ©2005 Tele Atlas, Rel. 8/2005

103.96667° W

103.95000° W

WGS84 103.93333° W

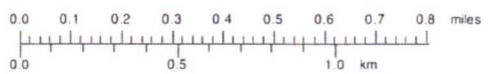


EXHIBIT A

TN MN
7'

District I
1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720
District II
811 S. First St., Artesia, NM 88210
Phone: (575) 748-1283 Fax: (575) 748-9720
District III
1000 Rio Brazos Road, Aztec, NM 87410
Phone: (505) 334-6178 Fax: (505) 334-6170
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505
Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico
Energy, Minerals & Natural Resources
Department
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

FORM C-102

Revised August 1, 2011

Submit one copy to appropriate

District Office

AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30-015- 44001		² Pool Code 96101	³ Pool Name SWD; Devonian
⁴ Property Code 317187	⁵ Property Name SOLARIS EDDY STATE		⁶ Well Number 2
⁷ OGRID No. 371643	⁸ Operator Name SOLARIS MIDSTREAM		⁹ Elevation 3022'

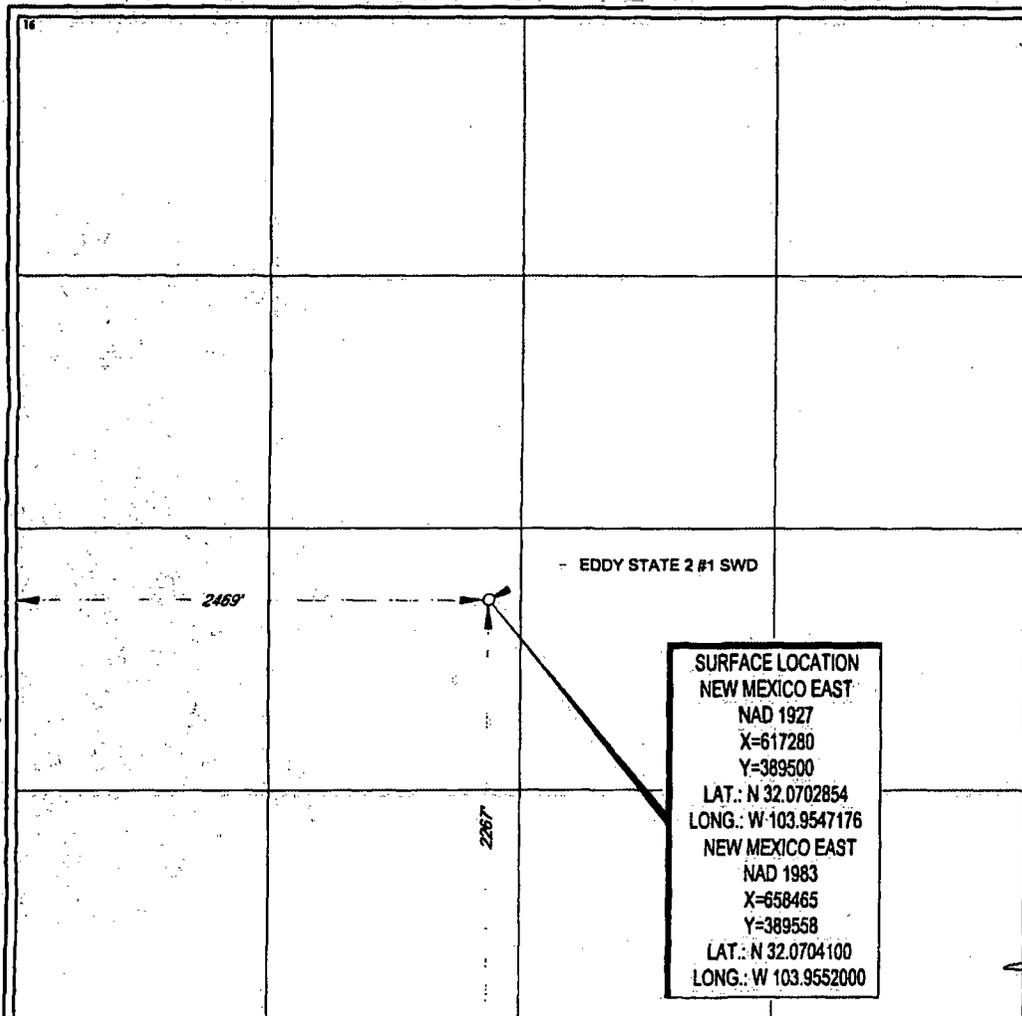
¹⁰Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
K	2	26-S	29-E	-	2267'	SOUTH	2469'	WEST	EDDY

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
-	-	-	-	-	-	-	-	-	-

¹² Dedicated Acres N/A	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.
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No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.



SURFACE LOCATION
NEW MEXICO EAST
NAD 1927
X=617280
Y=389500
LAT.: N 32.0702854
LONG.: W 103.9547176
NEW MEXICO EAST
NAD 1983
X=658465
Y=389558
LAT.: N 32.0704100
LONG.: W 103.9552000

¹⁷OPERATOR CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unless mineral interests in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order as before entered by the Division.

Brian Wood

12-13-16

Signature

Date

Brian Wood

Printed Name

brian@permitswest.com

E-mail Address:

(505) 466-8120

¹⁸SURVEYOR CERTIFICATION

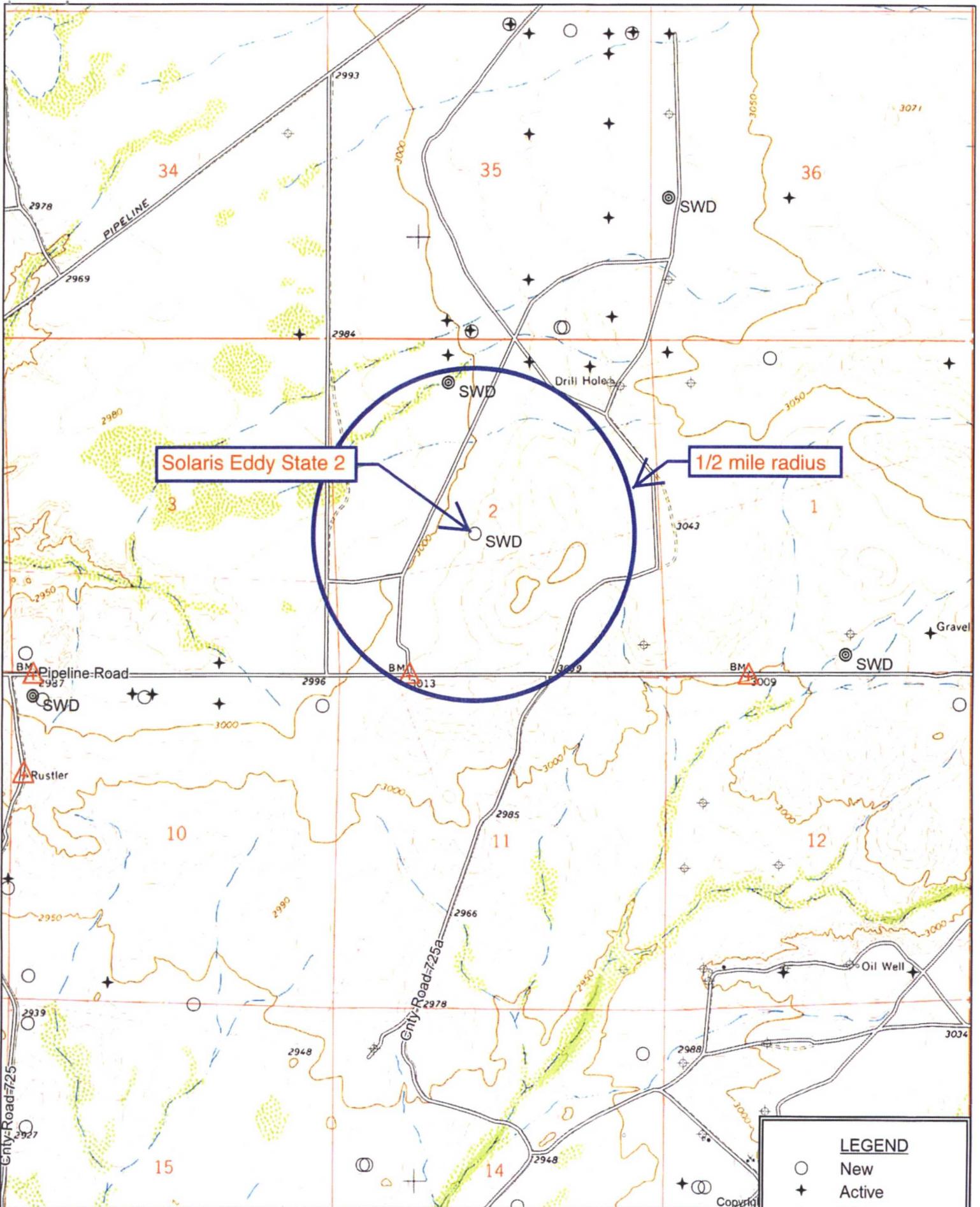
I hereby certify that the well location shown on this plat was plotted from field notes of a land survey made by me or under my supervision, and that the same is true to the best of my belief.

09/19/2016

Date of Survey

Signature and Seal of Professional Surveyor





Solaris Eddy State 2

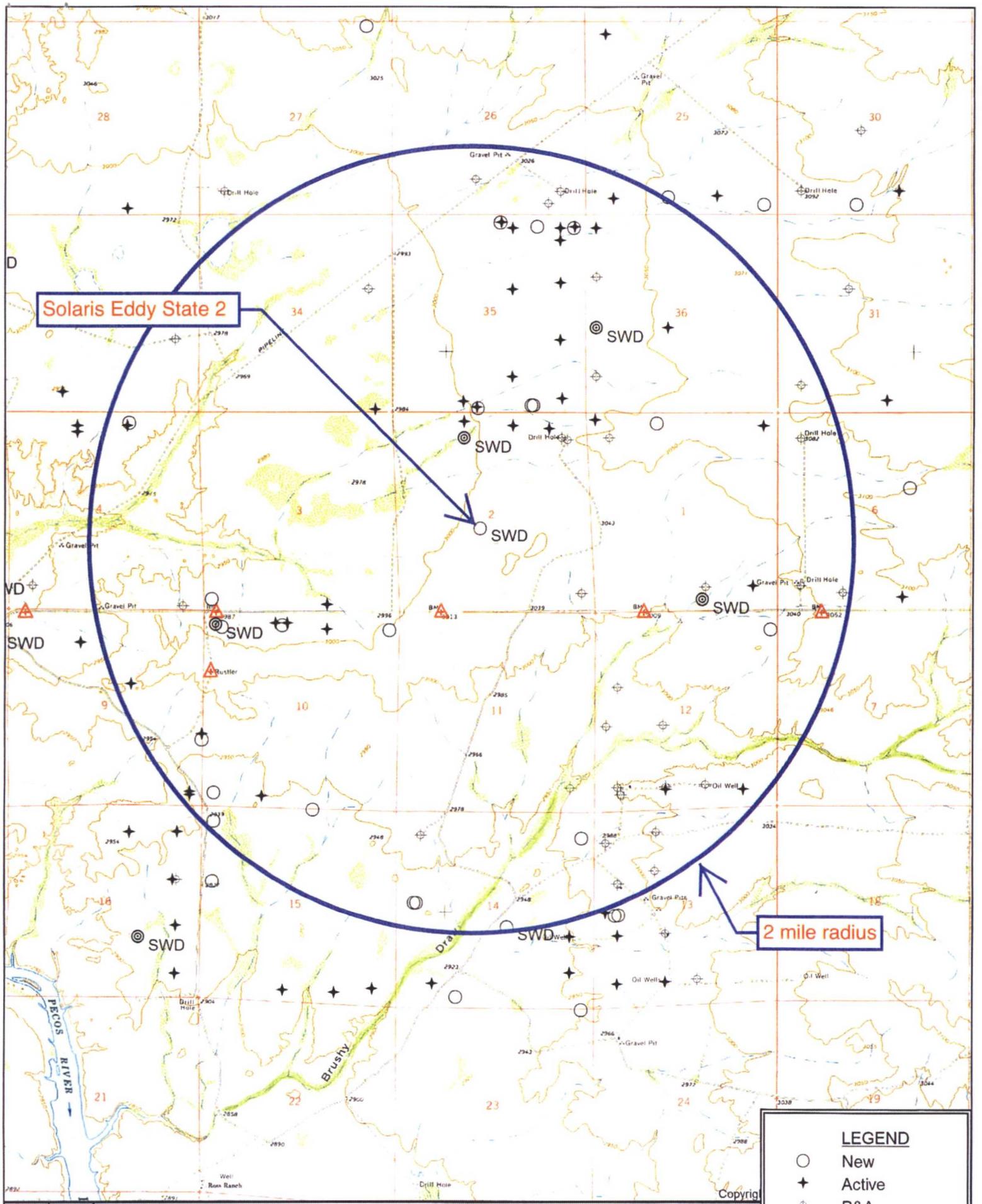
1/2 mile radius

LEGEND	
○	New
+	Active
⊕	P&A
⊙	INJ
⊗	SWD
⊕	Water

Quad: ROSS RANCH
Scale: 1 inch = 2,000 ft.

EXHIBIT B





Solaris Eddy State 2

2 mile radius

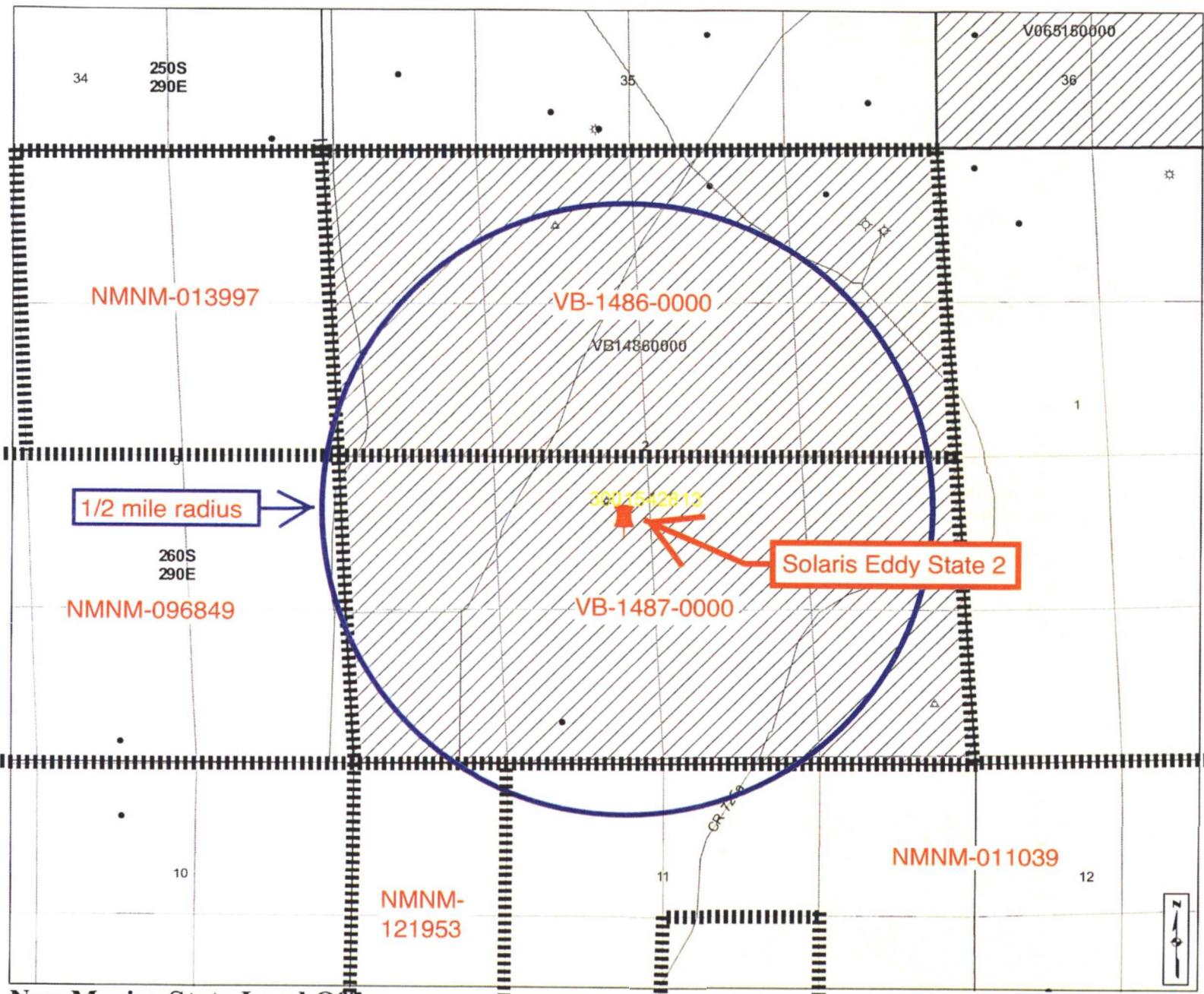
LEGEND	
○	New
+	Active
⊕	P&A
⊙	INJ
⊗	SWD
⊖	Water

Quad: ROSS RANCH
Scale: 1 inch = 3,333 ft.

EXHIBIT C



Copyright



- Cartographic Features**
- County Boundaries
 - County Seats
 - City, Town or Village
 - SLO District Offices
 - SLO District Boundary
 - Hwy Mileposts
 - Interstate
 - NM Hwy
 - US Hwy
 - Local Road
 - Continental Divide
- Federal Minerals Ownership**
- All Minerals
 - Coal Only
 - Oil and Gas Only
 - Oil, Gas and Coal Only
 - Other Minerals
- State Trust Lands**
- Surface Estate
 - Subsurface Estate
 - Surface and Subsurface Estate
- State Leases**
- Oil and Gas Leases
 - Agricultural Leases
 - Commercial Leases
 - Minerals Leases
 - Not Available for Oil and Gas Leasing
 - Oil and Gas Leasing Influenced by Restriction
- Oil and Gas Related Features**
- Oil and Gas Unit Boundary
 - Participating Areas in Units
 - Geologic Regions
 - Volcanic Vents
 - NMOC D Order R-111-P
 - Potash Enclave Outline
- NMOC D Oil and Gas Wells**
- CO₂
 - Injection
 - Oil
 - Water
 - Gas
 - Miscellaneous
 - Salt Water Disposal
 - DA or PA

1/2 mile radius

Solaris Eddy State 2

New Mexico State Land Office
Oil, Gas and Minerals

0 0.05 0.1 0.2 0.3 0.4 Miles
Universal Transverse Mercator Projection, Zone 13
1983 North American Datum

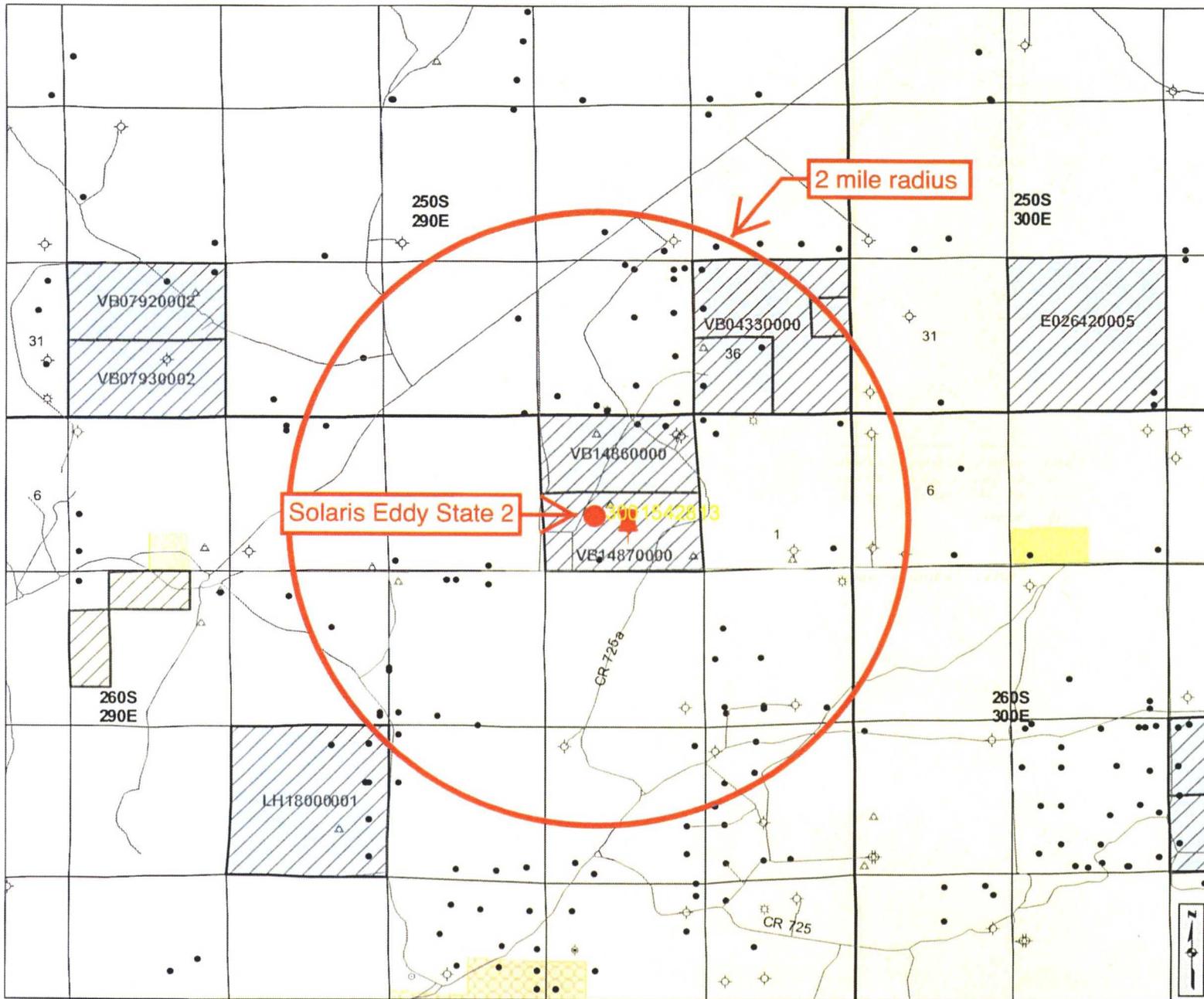
The New Mexico State Land Office assumes no responsibility or liability for, or in connection with, the accuracy, reliability or use of the information provided here, in State Land Office data layers or any other data layer.
Land Office Geographic Information Center
logic@slo.state.nm.us

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EXHIBIT D



www.nmstatelands.org



Cartographic Features

- County Boundaries
- County Seats
- City, Town or Village
- SLO District Offices
- SLO District Boundary
- Hwy Mileposts
- Interstate
- NM Hwy
- Continental Divide
- US Hwy
- Local Road

Federal Minerals Ownership

- All Minerals
- Coal Only
- Oil and Gas Only
- Oil, Gas and Coal Only
- Other Minerals

State Trust Lands

- Surface Estate
- Subsurface Estate
- Surface and Subsurface Estate

State Leases

- Oil and Gas Leases
- Agricultural Leases
- Commercial Leases
- Minerals Leases
- Not Available for Oil and Gas Leasing
- Oil and Gas Leasing Influenced by Restriction

Oil and Gas Related Features

- Oil and Gas Unit Boundary
- Participating Areas in Units
- Geologic Regions
- Volcanic Vents
- NMOC Order R-111-P
- Potash Enclave Outline

NMOC Oil and Gas Wells

- CO₂
- Injection
- Water
- Gas
- Miscellaneous
- Salt Water Disposal
- DA or PA

**New Mexico State Land Office
Oil, Gas and Minerals**

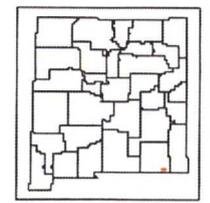
0 0.2 0.4 0.8 1.2 1.6 Miles
 Universal Transverse Mercator Projection, Zone 13
 1983 North American Datum

The New Mexico State Land Office assumes no responsibility or liability for, or in connection with, the accuracy, reliability or use of the information provided here, in State Land Office data layers or any other data layer.

Land Office Geographic Information Center
 logic@slo.state.nm.us

Created On: 8/4/2016 4:41:14 PM

EXHIBIT E



www.nmstatelands.org

WELL	API	SECTION, T25S, R29E	UNIT	ZONE	pH	TDS mg/l	Na mg/l	Ca mg/l	Fe mg/l	Mg mg/l	Mn mg/l	Cl mg/l	H2CO3 mg/l	Sulfate mg/l	CO2 mg/l
Slider 8 Fed. 3H	3001538272	8	J	Avalon Upper	7	65466	24094	833	33	153	0.3	38189	183	1589	250
Slider 8 Fed. 1H	3001538242	8	J	Avalon Upper	6.9	190364	72196	814	60	289	1	113348	707.6	1578	500
Slider 8 Fed. 3H	3001538272	8	J	Avalon Upper	7.2	150472	55164	2053	37	445	0.5	89777	610	1249	500
Chimayo 16 State 1	3001531781	16	C		6.28	176868	56488	9205	46	1202		107748	85	599	110
Chimayo 16 State 1	3001531781	16	C		6.35	172672	61234	2804	7	567	0.9	104500	1464	734	530
Chimayo 16 State 1	3001531781	16	C		6.17	185822	62841	3735	15	796	1	115452	902.8	581	580
Chimayo 16 State 1	3001531781	16	C		6.05	173435	60846	3702	7	782	1.5	105441	732	496	490
Chimayo 16 State 1	3001531781	16	C		6.5	235300	76546	10332	379	1589	4.5	142827	73	1021	1400
Cooter 16 State 2H	3001537626	16	M	Avalon Upper	7.5	129595	49316	618	10	129	0.25	76682	366	1747	450
Cooter 16 State 1H	3001537625	16	N	Avalon Upper	7	208454	79520	498	28	162	0.4	121800	3208.4	1994	990
Cooter 16 State 2H	3001537626	16	M	Avalon Upper	7	219574	84179	370	22	141	0.4	129012	3178.6	1497	980
Cooter 16 State 3H	3001537627	16	D	Avalon Upper	7	201311	77136	343	34	108	0.6	117265	3342.8	2127	990
Cooter 16 State 4H	3001537628	16	N	Avalon Upper	7	190431	71871	929	110	237	1.5	111478	3224.6	1389	1140
Cooter 16 State Com 5H	3001537875	16	O	Avalon Upper	7	187759	71166	758	20	178	0.3	109624	3212.4	1623	970
Chimayo 16 State 3	3001538105	16	F		7	192951	73058	776	94	177	1.5	112506	3123.2	1981	980

EXHIBIT F

WELL	API	SECTION, T25S, R29E	UNIT	ZONE	pH	TDS mg/l	Na mg/l	Ca mg/l	Fe mg/l	Mg mg/l	Mn mg/l	Cl mg/l	H2CO3 mg/l	Sulfate mg/l	CO2 mg/l
Cooter 16 State Com 7H	3001537877	16	P	Avalon Upper	7	200382	76518	605	91	154	1.5	118991	1464	1277	700
Cooter 16 State Com 8H	3001537878	16	P	Avalon Upper	6.8	207678	79392	595	99	147	1.5	123161	1708	1342	800
Cooter 16 State Com 6H	3001537876	16	O	Avalon Upper	7	193732	74028	513	104	118	1	113441	1830	2665	700

NM WAIDS

DATA

MAPS

HOME

SCALE

CORROSION

General Information About: Sample 5199			
SQUARE LAKE DEEP UNIT 001			
API	3001503979	Sample Number	
Unit/Section/ Township/Range	J / 33 / 16 S / 30 E	Field	
County	Eddy	Formation	DEV
State	NM	Depth	
Lat/Long	32.87982 / -103.97885	Sample Source	DST
TDS (mg/L)	63260	Water Type	
Sample Date(MM/DD/YYYY)		Analysis Date(MM/DD/YYYY)	
Remarks/Description			
Cation Information (mg/L)		Anion Information (mg/L)	
Potassium (K)		Sulfate (SO)	3600
Sodium (Na)		Chloride (Cl)	34400
Calcium (Ca)		Carbonate (CO ₃)	
Magnesium (Mg)		Bicarbonate (HCO ₃)	1260
Barium (Ba)		Hydroxide (OH)	
Manganese (Mn)		Hydrogen Sulfide (H ₂ S)	
Strontium (Sr)		Carbon Dioxide (CO ₂)	
Iron (Fe)		Oxygen (O)	



EXHIBIT F



New Mexico Office of the State Engineer

Water Column/Average Depth to Water

(A CLW#### in the POD suffix indicates the POD has been replaced & no longer serves a water right file.)

(R=POD has been replaced,
O=orphaned,
C=the file is closed)

(quarters are 1=NW 2=NE 3=SW 4=SE)
(quarters are smallest to largest) (NAD83 UTM in meters)

(In feet)

POD Number	POD Code	Sub-basin	County	Q	Q	Q	Sec	Tws	Rng	X	Y	Distance	Depth Well	Depth Water	Water Column
C 01360	C	ED	64	16	4	05	26S	30E	602997	3548152	4418	770	173	597	
C 01361		ED	3	4	3	05	26S	30E	603240	3548157	4660	775	184	591	

Average Depth to Water: 178 feet
Minimum Depth: 173 feet
Maximum Depth: 184 feet

Record Count: 2

UTM NAD83 Radius Search (in meters):

Easting (X): 598614

Northing (Y): 3548718

Radius: 4830 meters

x 3.28 feet/meter

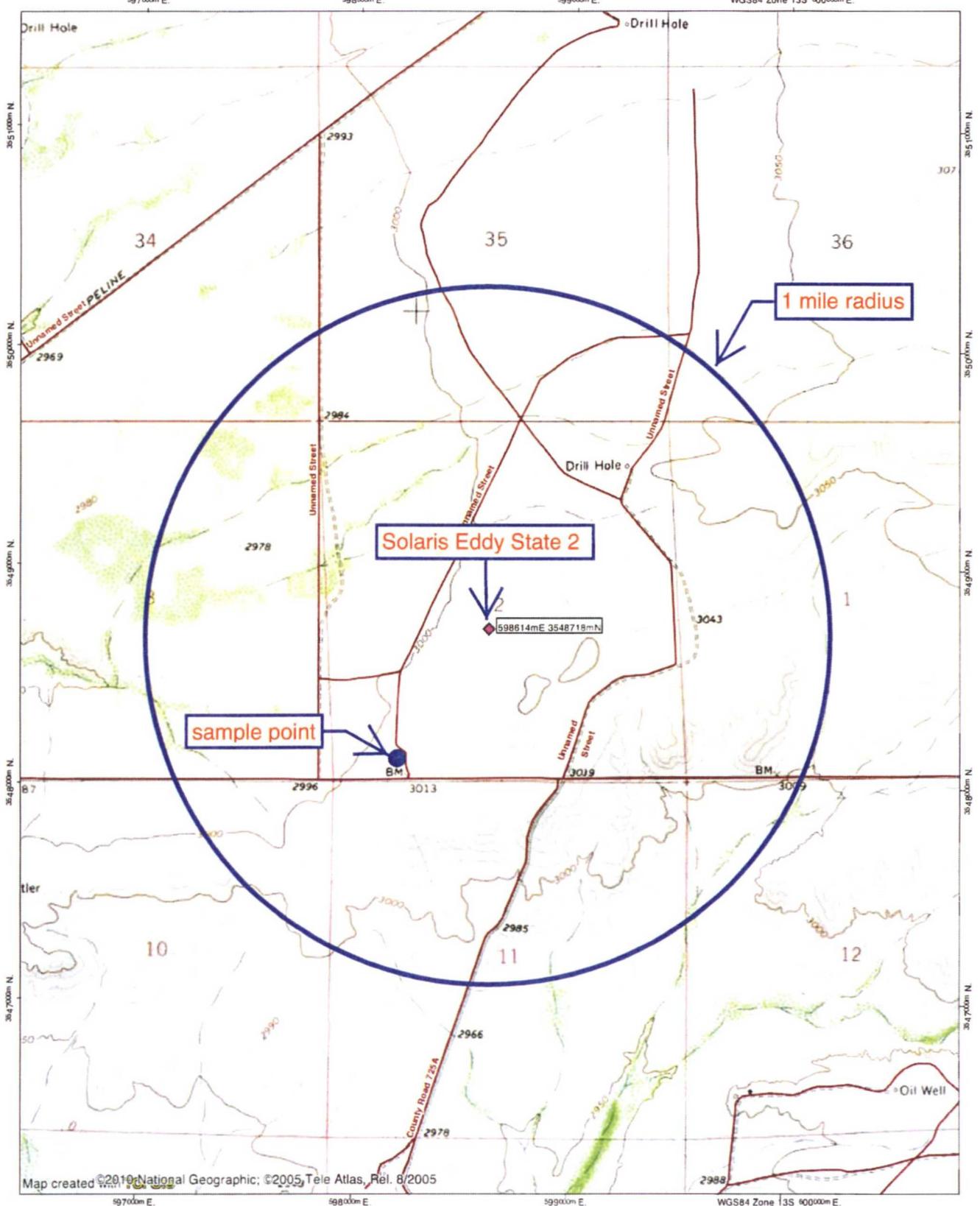
15,842 feet (=3.00 miles)

The data is furnished by the NMOSE/ISC and is accepted by the recipient with the expressed understanding that the OSE/ISC make no warranties, expressed or implied, concerning the accuracy, completeness, reliability, usability, or suitability for any particular purpose of the data.

12/29/16 10:12 AM

WATER COLUMN/ AVERAGE DEPTH TO WATER

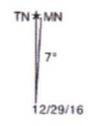
EXHIBIT G



Map created ©2010 National Geographic; ©2005 Tele Atlas, Rel. 8/2005



EXHIBIT G



Hall Environmental Analysis Laboratory, Inc.

Analytical Report

Lab Order 1608954

Date Reported: 8/29/2016

CLIENT: Permits West

Client Sample ID: Reposada SWD #1

Project: Solaris Resposada SWD

Collection Date: 8/12/2016 11:15:00 AM

Lab ID: 1608954-001

Matrix: AQUEOUS

Received Date: 8/16/2016 12:48:00 PM

Analyses	Result	PQL	Qual	Units	DF	Date Analyzed	Batch
EPA METHOD 1664A							Analyst: trc
N-Hexane Extractable Material	ND	9.7		mg/L	1	8/22/2016 9:06:00 AM	27097
EPA METHOD 300.0: ANIONS							Analyst: MRA
Chloride	350	50	*	mg/L	100	8/17/2016 8:48:56 PM	R36593
SM2540C MOD: TOTAL DISSOLVED SOLIDS							Analyst: KS
Total Dissolved Solids	1220	20.0	*	mg/L	1	8/20/2016 3:13:00 PM	27053

EXHIBIT G

Refer to the QC Summary report and sample login checklist for flagged QC data and preservation information.

Qualifiers:		
*	Value exceeds Maximum Contaminant Level.	B Analyte detected in the associated Method Blank
D	Sample Diluted Due to Matrix	E Value above quantitation range
H	Holding times for preparation or analysis exceeded	J Analyte detected below quantitation limits
ND	Not Detected at the Reporting Limit	P Sample pH Not In Range
R	RPD outside accepted recovery limits	RL Reporting Detection Limit
S	% Recovery outside of range due to dilution or matrix	W Sample container temperature is out of limit as specified

QC SUMMARY REPORT

Hall Environmental Analysis Laboratory, Inc.

WO#: 1608954

29-Aug-16

Client: Permits West
Project: Solaris Resposada SWD

Sample ID: MB-27097	SampType: MBLK	TestCode: EPA Method 1664A								
Client ID: PBW	Batch ID: 27097	RunNo: 36688								
Prep Date: 8/22/2016	Analysis Date: 8/22/2016	SeqNo: 1136744 Units: mg/L								
Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual
N-Hexane Extractable Material	ND	10								

Sample ID: LCS-27097	SampType: LCS	TestCode: EPA Method 1664A								
Client ID: LCSW	Batch ID: 27097	RunNo: 36688								
Prep Date: 8/22/2016	Analysis Date: 8/22/2016	SeqNo: 1136745 Units: mg/L								
Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual
N-Hexane Extractable Material	40	10	40.00	0	101	78	114			

Qualifiers:

- * Value exceeds Maximum Contaminant Level.
- D Sample Diluted Due to Matrix
- H Holding times for preparation or analysis exceeded
- ND Not Detected at the Reporting Limit
- R RPD outside accepted recovery limits
- S % Recovery outside of range due to dilution or matrix
- B Analyte detected in the associated Method Blank
- E Value above quantitation range
- J Analyte detected below quantitation limits
- P Sample pH Not In Range
- RL Reporting Detection Limit
- W Sample container temperature is out of limit as specified



QC SUMMARY REPORT
Hall Environmental Analysis Laboratory, Inc.

WO#: 1608954

29-Aug-16

Client: Permits West
Project: Solaris Resposada SWD

Sample ID: MB	SampType: mblk	TestCode: EPA Method 300.0: Anions								
Client ID: PBW	Batch ID: R36593	RunNo: 36593								
Prep Date:	Analysis Date: 8/17/2016	SeqNo: 1133301	Units: mg/L							
Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual
Chloride	ND	0.50								

Sample ID: LCS	SampType: lcs	TestCode: EPA Method 300.0: Anions								
Client ID: LCSW	Batch ID: R36593	RunNo: 36593								
Prep Date:	Analysis Date: 8/17/2016	SeqNo: 1133302	Units: mg/L							
Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual
Chloride	4.7	0.50	5.000	0	94.3	90	110			

Qualifiers:

- * Value exceeds Maximum Contaminant Level.
- D Sample Diluted Due to Matrix
- H Holding times for preparation or analysis exceeded
- ND Not Detected at the Reporting Limit
- R RPD outside accepted recovery limits
- S % Recovery outside of range due to dilution or matrix
- B Analyte detected in the associated Method Blank
- E Value above quantitation range
- J Analyte detected below quantitation limits
- P Sample pH Not In Range
- RL Reporting Detection Limit
- W Sample container temperature is out of limit as specified



QC SUMMARY REPORT
Hall Environmental Analysis Laboratory, Inc.

WO#: 1608954
 29-Aug-16

Client: Permits West
 Project: Solaris Resposada SWD

Sample ID: MB-27053	SampType: MBLK	TestCode: SM2540C MOD: Total Dissolved Solids								
Client ID: PBW	Batch ID: 27053	RunNo: 36649								
Prep Date: 8/18/2016	Analysis Date: 8/20/2016	SeqNo: 1135048	Units: mg/L							
Analyte:	Result:	PQL	SPK value	SPK Ref Val.	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual
Total Dissolved Solids	ND	20.0								

Sample ID: LCS-27053	SampType: LCS	TestCode: SM2540C MOD: Total Dissolved Solids								
Client ID: LCSW	Batch ID: 27053	RunNo: 36649								
Prep Date: 8/18/2016	Analysis Date: 8/20/2016	SeqNo: 1135049	Units: mg/L							
Analyte:	Result:	PQL	SPK value	SPK Ref Val.	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual
Total Dissolved Solids	1030	20.0	1000	0	103	80	120			

Qualifiers:

- * Value exceeds Maximum Contaminant Level.
- D Sample Diluted Due to Matrix.
- H Holding times for preparation or analysis exceeded
- ND Not Detected at the Reporting Limit
- R RPD outside accepted recovery limits
- S % Recovery outside of range due to dilution or matrix
- B Analyte detected in the associated Method Blank
- E Value above quantitation range
- J Analyte detected below quantitation limits
- P Sample pH Not In Range
- RL Reporting Detection Limit
- W Sample container temperature is out of limit as specified



Entzminger Geoscience Services, LLC

PO Box 1543

Midland, TX 79702

432-638-2960

DavidJEntzminger@gmail.com

September 7, 2016

New Mexico Oil Conservation Division
1220 South St. Francis Drive
Santa Fe, New Mexico 87505

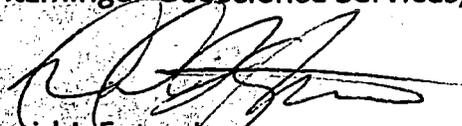
RE: Geology Statement
Silurian SWD well
Sec. 2, T26N, R29E
Eddy County, NM

To whom it may concern:

Available geologic and engineering data related to the proposed Silurian SWD Well has been reviewed, and there is no evidence for a hydrological connection between the proposed deep Silurian injection zone below 14,700' md. This should be significantly below underground sources of drinking water found in the immediate area. For clarification, please note that the interval below the Woodford is Silurian age in this area even though many documents call it Devonian.

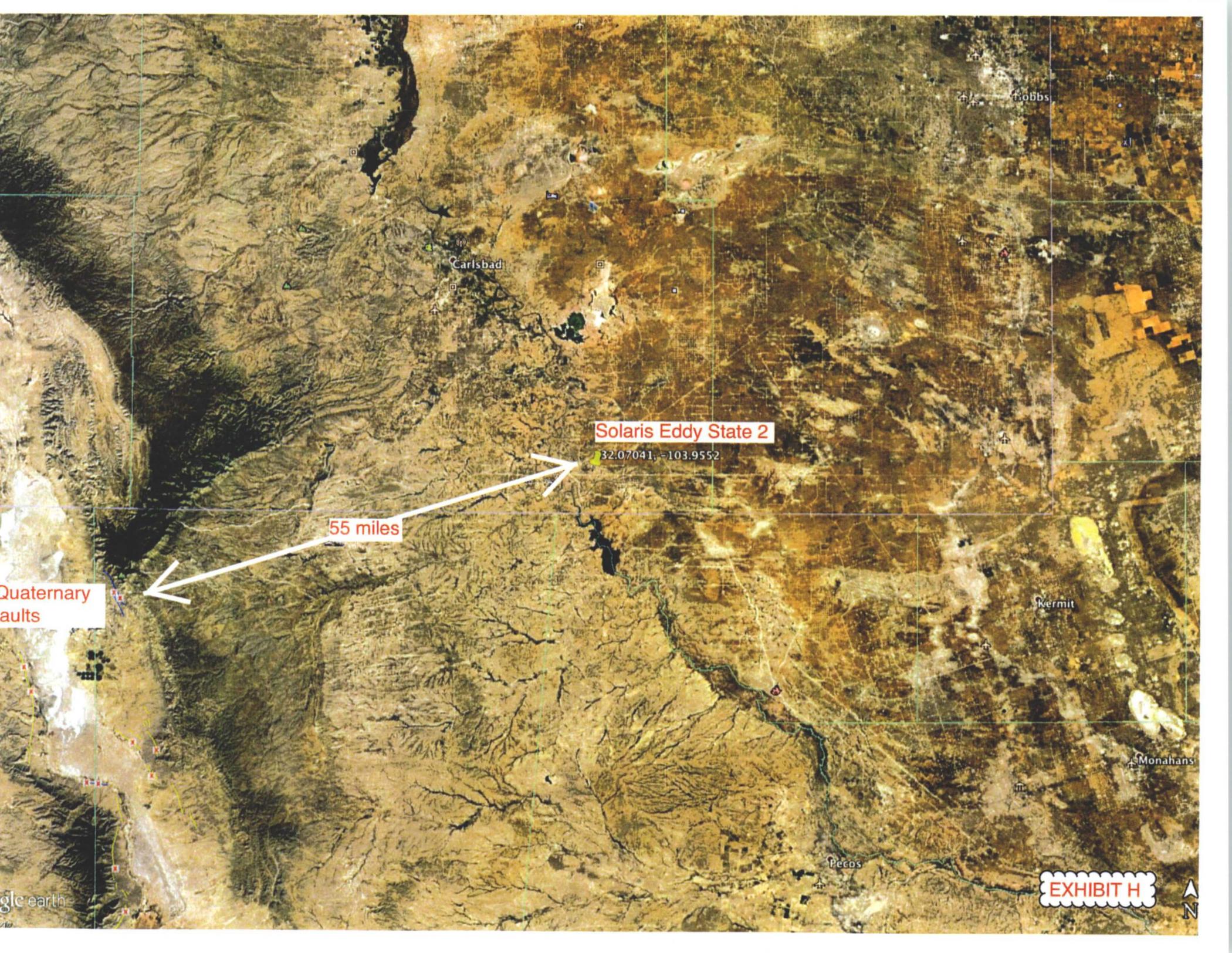
Sincerely,

Entzminger Geoscience Services, LLC


David J. Entzminger

CPG#5124; TBPG#1948

EXHIBIT H



Solaris Eddy State 2

32.07041, -103.9552

55 miles

Quaternary faults

EXHIBIT H

Affidavit of Publication

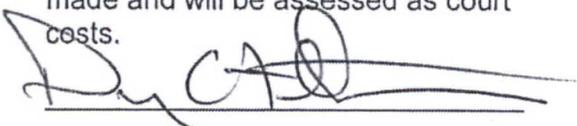
State of New Mexico,
County of Eddy, ss.

Danny Fletcher, being first duly
sworn, on oath says:

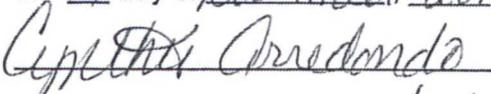
That he is the Publisher of the
Carlsbad Current-Argus, a
newspaper published daily at the
City of Carlsbad, in said county of
Eddy, state of New Mexico and of
general paid circulation in said
county; that the same is a duly
qualified newspaper under the laws
of the State wherein legal notices
and advertisements may be
published; that the printed notice
attached hereto was published in the
regular and entire edition of said
newspaper and not in supplement
thereof on the date as follows, to wit:

December 14 2016

That the cost of publication is **\$50.15**
and that payment thereof has been
made and will be assessed as court
costs.



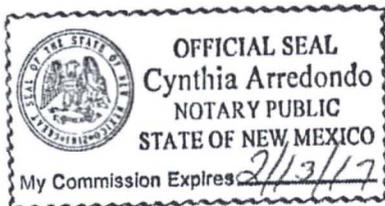
Subscribed and sworn to before me
this 14 day of November, 2016



My commission Expires 2/13/17

Notary Public

December 14, 2016
Solaris Midstream, LLC is applying to drill the Solaris Eddy State 2 as a saltwater disposal well. The well is staked at 2267 FSL & 2469 FWL Sec. 2, T. 26 S., R. 29 E., Eddy County and is 12 miles southeast of Malaga, NM. Disposal will be in the Devonian from 15,500' to 16,900'. Maximum injection pressure will be 3,100 psi. Maximum disposal rate will be 25,000 bwpd. Interested parties must file objections or requests for hearing with the NM Oil Conservation Division, 1220 South Saint Francis Dr., Santa Fe, NM 87505 within 15 days. Additional information can be obtained by contacting: Brian Wood, Permits West, Inc., 37 Verano Loop, Santa Fe, NM 87508. Phone number is (505) 466-8120.



Affidavit of Publication

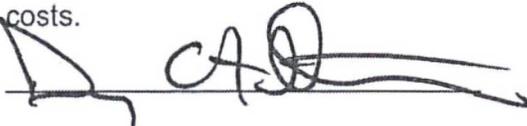
State of New Mexico,
County of Eddy, ss.

Danny Fletcher, being first duly
sworn, on oath says:

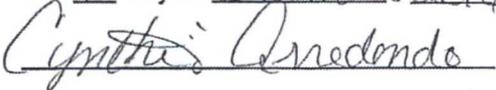
That he is the Publisher of the
Carlsbad Current-Argus, a
newspaper published daily at the
City of Carlsbad, in said county of
Eddy, state of New Mexico and of
general paid circulation in said
county; that the same is a duly
qualified newspaper under the laws
of the State wherein legal notices
and advertisements may be
published; that the printed notice
attached hereto was published in the
regular and entire edition of said
newspaper and not in supplement
thereof on the date as follows, to wit:

December 20 2016

That the cost of publication is **\$62.15**
and that payment thereof has been
made and will be assessed as court
costs.



Subscribed and sworn to before me
this 27 day of December, 2016



My commission Expires 2/13/17

Notary Public

December 20, 2016
To John F. Green, who
is shown on BLM re-
cords as a lessee of
BLM oil & gas lease
NMNM-011039 and
whose last known ad-
dress was 43 Haight
Ave., Poughkeepsie
NY 12603, or his
devisees, Solaris Mid-
stream, LLC is apply-
ing to drill the Solaris
Eddy State 2 as a salt-
water disposal well.
The well is staked at
2267 FSL & 2469 FWL
Sec. 2, T. 26 S., R. 29
E., Eddy County and is
12 miles southeast of
Malaga, NM. Disposal
will be in the Devonian
from 15,500' to
16,900'. Maximum in-
jection pressure will
be 3,100 psi. Maxi-
mum disposal rate will
be 25,000 bwpd. In-
terested parties must
file objections or re-
quests for hearing
with the NM Oil Con-
servation Division,
1220 South Saint
Francis Dr., Santa Fe,
NM 87505 within 15
days of the publica-
tion of this ad. Addi-
tional information can
be obtained by con-
tacting: Brian Wood,
Permits West, Inc., 37
Verano Loop, Santa
Fe, NM 87508. Phone
number is (505) 466-
8120.

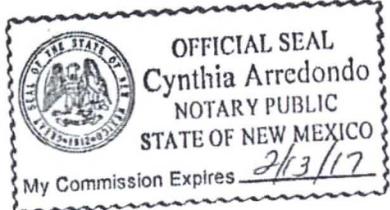


EXHIBIT I

December 29, 2016

NM State Land Office
PO Box 1148
Santa Fe NM 87504

TYPICAL LETTER

Solaris Midstream LLC is applying (see attached application) to drill the Solaris Eddy State 2 as a saltwater disposal well. As required by NM Oil Conservation Division (NMOCD) rules, I am notifying you of the following proposal. This letter is a notice only. No action is needed unless you have questions or objections.

Well: Solaris Eddy State 2 ID = 16,900'

Proposed Disposal Zone: Devonian (15,500' - 16,900')

Location: 2267' FSL & 2469' FWL Sec. 2, T. 26 S., R. 29 E., Eddy County, NM

Approximate Location: 12 miles southeast of Malaga, NM

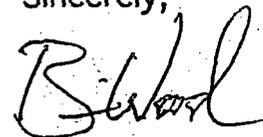
Applicant Name: Solaris Midstream LLC (281) 501-3079

Applicant's Address: 8901 Gaylord, Suite 210, Houston TX 77024

Submittal Information: Application for a saltwater disposal well will be filed with NMOCD. If you have an objection, or wish to request a hearing, then it must be filed with the NMOCD within 15 days of receipt of this letter. NMOCD address is 1220 South St. Francis Dr. Santa Fe, NM 87505. Their phone is 505 476-3440.

Please call me if you have any questions.

Sincerely,



Brian Wood

EXHIBIT J

7016 2070 0000 9704 4973

CERTIFIED MAIL® RECEIPT
Domestic Mail Only

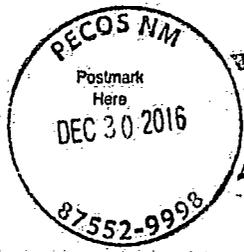
For delivery information, visit our website at www.usps.com

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	ELM 620 E. Greene

Sent To: **Carbair, TEH**
Street & Apt. No., or PO Box No. **Solaris**
City, State, ZIP+4 **SF SOLARIS EDDY STATE 2**

PS Form 3800, April 2015 PSN 7530-02-000-9071 See Reverse for Instructions



7014 2870 0001 8951 4005

CERTIFIED MAIL® RECEIPT
Domestic Mail Only

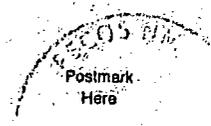
For delivery information, visit our website at www.usps.com

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	ELM 620 E. Greene

Sent To: **Carlsbad-NM-88220**
Street & Apt. No., or PO Box No. **Solaris Eddy State 2**
City, State, ZIP+4

PS Form 3800, July 2014 See Reverse for Instructions



7014 2870 0001 8951 3978

U.S. Postal Service®
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

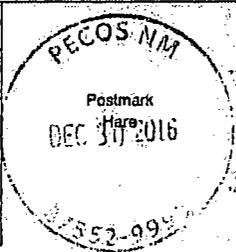
For delivery information, visit our website at www.usps.com

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	COG Operating LLC 600 W. Illinois Ave Midland TX 79701 Solaris Eddy State 2

Sent To: **COG Operating LLC**
Street & Apt. No., or PO Box No. **600 W. Illinois Ave**
City, State, ZIP+4 **Midland TX 79701**

PS Form 3800, July 2014 See Reverse for Instructions



7014 2870 0001 8951 4074

U.S. Postal Service®
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

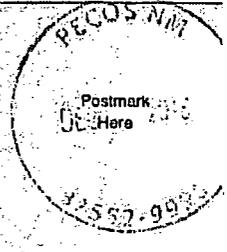
For delivery information, visit our website at www.usps.com

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	Chevron USA Inc 6304 Beauville Midland TX 79706 Solaris Eddy State 2

Sent To: **Chevron USA Inc**
Street & Apt. No., or PO Box No. **6304 Beauville**
City, State, ZIP+4 **Midland TX 79706**

PS Form 3800, July 2014 See Reverse for Instructions



7014 2870 0001 8951 3992

U.S. Postal Service®
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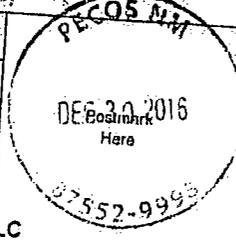
For delivery information, visit our website at www.usps.com

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	Concho Oil & Gas LLC 600 W. Illinois Ave One Concho Center Midland TX 79701 Solaris Eddy State 2

Sent To: **Concho Oil & Gas LLC**
Street & Apt. No., or PO Box No. **600 W. Illinois Ave**
City, State, ZIP+4 **One Concho Center**

PS Form 3800, July 2014 See Reverse for Instructions



7014 2870 0001 8951 3985

U.S. Postal Service®
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OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	COG Production, LLC 600 W. Illinois Ave One Concho Center Midland TX 79701 Solaris Eddy State 2

Sent To: **COG Production, LLC**
Street & Apt. No., or PO Box No. **600 W. Illinois Ave**
City, State, ZIP+4 **One Concho Center**

PS Form 3800, July 2014 See Reverse for Instructions

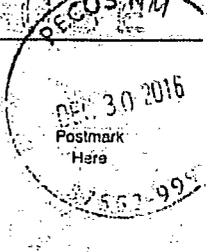


EXHIBIT J

7014 2870 0001 8951 4359

CERTIFIED MAIL® RECEIPT
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OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	

PECOS NM
Postmark Here
DEC 16 2016
87552-9998

Sent To: Dominion OK TX Expl. & Pro. c/o RKI
120 Tredegar St.
Richmond VA 23219
Solaris Eddy State 2

Street & Apt. No., or PO Box No.
City, State, ZIP+4

PS Form 3800, July 2014 See Reverse for Instructions

7014 2870 0001 8951 4142

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
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OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	

PECOS NM
Postmark Here
DEC 16 2016
87552-9998

Sent To: Exco Resources Inc
12377 Merit Dr.
Suite 1700
Dallas TX 75251
Solaris Eddy State 2

Street & Apt. No., or PO Box No.
City, State, ZIP+4

PS Form 3800, July 2014 See Reverse for Instructions

7014 2870 0001 8951 4373

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
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OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	

PECOS NM
Postmark Here
DEC 16 2016
87552-9998

Sent To: Dominion OK TX & RKI c/o WPX
PO Box 3102
Tulsa OK 74101
Solaris Eddy State 2

Street & Apt. No., or PO Box No.
City, State, ZIP+4

PS Form 3800, July 2014 See Reverse for Instructions

7014 2870 0001 8951 4029

CERTIFIED MAIL® RECEIPT
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Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	

PECOS NM
Postmark Here
DEC 16 2016
87552-9998

Sent To: Costilla Energy
PO Box 10369
Midland TX 79702
Solaris Eddy State 2

Street & Apt. No., or PO Box No.
City, State, ZIP+4

PS Form 3800, July 2014 See Reverse for Instructions

7014 2870 0001 8951 4360

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Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	

PECOS NM
Postmark Here
DEC 16 2016
87552-9998

Sent To: El Paso Natural Gas c/o Kinder Morgan
1001 Louisiana
Suite 1000
Houston TX 77002
Solaris Eddy State 2

Street & Apt. No., or PO Box No.
City, State, ZIP+4

PS Form 3800, July 2014 See Reverse for Instructions

7014 2870 0001 8951 4166

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OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	

PECOS NM
Postmark Here
DEC 16 2016
87552-9998

Sent To: Dominion OK TX Expl. & Pro. c/o RKI
3500 One Williams Center
Tulsa OK 74172
Solaris Eddy State 2

Street & Apt. No., or PO Box No.
City, State, ZIP+4

PS Form 3800, July 2014 See Reverse for Instructions

EXHIBIT J

7014 2870 0001 8951 4098

CERTIFIED MAIL® RECEIPT
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Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	

Kerrco Inc
Niels-Esperson Bldg
Houston TX 77002
Solaris Eddy State 2

Sent To
Houston TX 77002
Solaris Eddy State 2

Street & Apt. No., or PO Box No.
City, State, ZIP+4

PS Form 3800, July 2014 See Reverse for Instructions

PECOS NM
Postmark Here
DEC 30 2016
87552-9998

7014 2870 0001 8951 4081

CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	

John Green
43 Haight Ave
Poughkeepsie NY 12603
Solaris Eddy State 2

Sent To
Poughkeepsie NY 12603
Solaris Eddy State 2

Street & Apt. No., or PO Box No.
City, State, ZIP+4

PS Form 3800, July 2014 See Reverse for Instruction

PECOS NM
Postmark Here
DEC 30 2016
87552-9998

7014 2870 0001 8951 4012

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT
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OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	

NM State Land Office
PO Box 1448
Santa Fe NM 87504
Solaris Eddy State 2

Sent To
Santa Fe NM 87504
Solaris Eddy State 2

Street & Apt. No., or PO Box No.
City, State, ZIP+4

PS Form 3800, July 2014 See Reverse for Instructions

PECOS NM
Postmark Here
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87552-9998

7014 2870 0001 8951 4043

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For delivery information, visit our website at www.usps.com

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	

Khody Land & Minerals Co
PO Box 3102
Tulsa OK 74101
Solaris Eddy State 2

Sent To
Tulsa OK 74101
Solaris Eddy State 2

Street & Apt. No., or PO Box No.
City, State, ZIP+4

PS Form 3800, July 2014 See Reverse for Instruction

PECOS NM
Postmark Here
DEC 30 2016
87552-9998

7014 2870 0001 8951 4227

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT
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For delivery information, visit our website at www.usps.com

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Nu-Energy
SF
SOLARIS
EDDY STATE 2

Sent To
Nu-Energy
SF
SOLARIS
EDDY STATE 2

Street & Apt. No., or PO Box No.
City, State, ZIP+4

PS Form 3800, July 2014 See Reverse for Instructions

PECOS NM
Postmark Here
DEC 30 2016
87552-9998

7014 2870 0001 8951 4210

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Nu-Energy
SOLARIS
EDDY STATE 2

Sent To
Nu-Energy
SOLARIS
EDDY STATE 2

Street & Apt. No., or PO Box No.
City, State, ZIP+4

PS Form 3800, July 2014 See Reverse for Instructions

PECOS NM
Postmark Here
DEC 30 2016
87552-9998

EXHIBIT J

7014 2870 0001 8951 4111

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	

RKC Inc
 1627 Hillside Rd
 Fairfield CT 06490
 Solaris Eddy State 2

Sent To
 Street & Apt. No., or PO Box No.
 City, State, ZIP+4

PS Form 3800, July 2014 See Reverse for Instructions

PECOS NM
 Postmark Here
 DEC 30 2016
 87552-9998

7014 2870 0001 8951 4128

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	

Three Forks Resources
 555-17th Street
 Ste 975
 Denver CO 80202
 Solaris Eddy State 2

Sent To
 Street & Apt. No., or PO Box No.
 City, State, ZIP+4

PS Form 3800, July 2014 See Reverse for Instructions

PECOS NM
 Postmark Here
 DEC 30 2016
 87552-9998

7014 2870 0001 8951 4050

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	

Charlotte Williamson
 PO Box 50410
 Austin TX 78763
 Solaris Eddy State 2

Sent To
 Street & Apt. No., or PO Box No.
 City, State, ZIP+4

PS Form 3800, July 2014 See Reverse for Instructions

PECOS NM
 Postmark Here
 DEC 30 2016
 87552-9998

EXHIBIT J

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

BLM
620 E. Greene
Carlsbad NM 88220

Solaris Eddy State 2

9590 9402 1840 6104 1559 79

2. Article Number (Transfer from service label)
7014 2870 0001 8951 4005

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *[Signature]* Agent Addressee

B. Received by (Printed Name)
C. Date of Delivery
11/2/17

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Insured Mail
 Mail Restricted Delivery
 Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Return Receipt for Merchandise
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *[Signature]* Agent Addressee

B. Received by (Printed Name)
C. Date of Delivery
11/2/17

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Insured Mail
 Mail Restricted Delivery
 Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Return Receipt for Merchandise
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

1. Article Addressed to:
Dominion OK TX Expl. & Pro.
120 Tredegar St.
Richmond VA 23219

Solaris Eddy State 2

9590 9402 1840 6104 1561 29

2. Article Number (Transfer from service label)
7014 2870 0001 8951 4159

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Chevron USA Inc
6301 Deauville
Midland TX 79706

Solaris Eddy State 2

9590 9402 1840 6104 1560 44

2. Article Number (Transfer from service label)
7014 2870 0001 8951 4074

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *[Signature]* Agent Addressee

B. Received by (Printed Name)
C. Date of Delivery
11/3/17

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Insured Mail
 Mail Restricted Delivery
 Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Return Receipt for Merchandise
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *[Signature]* Agent Addressee

B. Received by (Printed Name)
C. Date of Delivery
11-3-17

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Insured Mail
 Mail Restricted Delivery
 Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Return Receipt for Merchandise
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

1. Article Addressed to:
Dominion OK TX Expl. & Pro. c/o RKI
3500 One Williams Center
Tulsa OK 74172

Solaris Eddy State 2

9590 9402 2411 6249 7133 30

2. Article Number (Transfer from service label)
7014 2870 0001 8951 4366

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

COG Production, LLC
600 W Illinois Ave
One Concho Center
Midland TX 79701

Solaris Eddy State 2

9590 9402 2411 6249 7132 00

2. Article Number (Transfer from service label)
7014 2870 0001 8951 3985

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *[Signature]* Agent Addressee

B. Received by (Printed Name)
C. Date of Delivery
11/3/17

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Insured Mail
 Mail Restricted Delivery
 Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Return Receipt for Merchandise
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *[Signature]* Agent Addressee

B. Received by (Printed Name)
C. Date of Delivery
11/3/17

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Insured Mail
 Mail Restricted Delivery
 Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Return Receipt for Merchandise
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

1. Article Addressed to:
Dominion OK TX & RKI c/o WPX
PO Box 3102
Tulsa OK 74101

Solaris Eddy State 2

9590 9402 2411 6249 7121 40

2. Article Number (Transfer from service label)
7014 2870 0001 8951 4173

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

COG Operating LLC
600 W Illinois Ave
Midland TX 79701

Solaris Eddy State 2

9590 9402 1840 6104 1559 48

2. Article Number (Transfer from service label)
7014 2870 0001 8951 3978

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *[Signature]* Agent Addressee

B. Received by (Printed Name)
C. Date of Delivery
11/3/17

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Insured Mail
 Mail Restricted Delivery
 Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Return Receipt for Merchandise
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *[Signature]* Agent Addressee

B. Received by (Printed Name)
C. Date of Delivery
11/3/17

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Insured Mail
 Mail Restricted Delivery
 Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Return Receipt for Merchandise
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

1. Article Addressed to:
Exco Resources Inc
12377 Merit Dr.
Suite 1700
Dallas TX 75251

Solaris Eddy State 2

9590 9402 2411 6249 7131 87

2. Article Number (Transfer from service label)
7014 2870 0001 8951 4142

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Concho Oil & Gas LLC
600 W Illinois Ave
One Concho Center
Midland TX 79701

Solaris Eddy State 2

9590 9402 1840 6104 1559 62

2. Article Number (Transfer from service label)
7014 2870 0001 8951 3992

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *[Signature]* Agent Addressee

B. Received by (Printed Name)
C. Date of Delivery
11/3/17

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Insured Mail
 Mail Restricted Delivery
 Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Return Receipt for Merchandise
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *[Signature]* Agent Addressee

B. Received by (Printed Name)
C. Date of Delivery
11/3/17

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Insured Mail
 Mail Restricted Delivery
 Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Return Receipt for Merchandise
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

1. Article Addressed to:
Kerrco Inc
Niels Esperson Bldg
Houston TX 77002

Solaris Eddy State 2

9590 9402 1840 6104 1560 68

2. Article Number (Transfer from service label)
7014 2870 0001 8951 4098

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>	<p>A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery JAN 03 2017</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below: _____</p>
<p>1. Article Addressed to:</p> <p>Khody Land & Minerals Co PO Box 3102 Tulsa OK 74101</p> <p>Solaris Eddy State 2</p> <p>9590 9402 1840 6104 1300 13</p>	<p>3. Service Type <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>
<p>2. Article Number (Transfer from service label)</p> <p>7014 2870 0001 8951 4043</p>	
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt</p>	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>	<p>A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery JAN -4- 2017</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below: _____</p>
<p>1. Article Addressed to:</p> <p>NM State Land Office PO Box 1148 Santa Fe NM 87504</p> <p>Solaris Eddy State 2</p> <p>9590 9402 1840 6104 1559 86</p>	<p>3. Service Type <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>
<p>2. Article Number (Transfer from service label)</p> <p>7014 2870 0001 8951 4012</p>	
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt</p>	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>	<p>A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery 1/3/17</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below: _____</p>
<p>1. Article Addressed to:</p> <p>Three Forks Resources 555 17th Street Ste 975 Denver CO 80202</p> <p>Solaris Eddy State 2</p> <p>9590 9402 2411 6249 7131 70</p>	<p>3. Service Type <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>
<p>2. Article Number (Transfer from service label)</p> <p>7014 2870 0001 8951 4128</p>	
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt</p>	



ORDER TYPE: WFX / PMX / SWD Number: _____ Order Date: _____ Legacy Permits/Orders: _____

Well No. 2 Well Name(s): SOLARIS Eddy store

API: 30-0 15-44001 Spud Date: _____ New or Old: N (UIC Class II Primacy 03/07/1982)

Footages 2267 FSL 2469 KWL Lot _____ or Unit K Sec 2 Tsp 2WS Rge 29E County Eddy

General Location: 2500 S. JAL Pool: SOLARIS WATER Pool No.: 9601

BLM 100K Map: JAL Operator: MIDSTREAM, LLC OGRID: 371643 Contact: Brian Wood Agent

COMPLIANCE RULE 5.9: Total Wells: 2 Inactive: 0 Fincl Assur: OK Compl. Order? N/A IS 5.9 OK? Y Date: _____

WELL FILE REVIEWED Current Status: Proposed

WELL DIAGRAMS: NEW: Proposed or RE-ENTER: Before Conv. After Conv. Logs in Imaging: N/A

Planned Rehab Work to Well: _____

Well Construction Details	Sizes (in) Borehole / Pipe	Setting Depths (ft)	Cement Sx or Cf	Cement Top and Determination Method
Planned ___ or Existing ___ Surface	<u>2 1/2"</u>	<u>575</u>	<u>1500</u>	<u>Surface/Visual</u>
Planned ___ or Existing ___ Interm/Prod	<u>1 1/2" / 1 3/4"</u>	<u>3175</u>	<u>1750</u>	<u>Surface/Visual</u>
Planned ___ or Existing ___ Interm/Prod	<u>12 1/4" / 9 5/8"</u>	<u>10300</u>	<u>175</u>	<u>Surface/Visual</u>
Planned ___ or Existing ___ Prod/Liner	<u>8 1/2" / 7"</u>	<u>15450</u>	<u>800</u>	<u>9800 / CBU</u>
Planned ___ or Existing ___ Liner				
Planned ___ or Existing <u>OH/PERF</u>	<u>155000 / 10400</u>			
			Inj Length <u>1400</u>	

Injection Lithostratigraphic Units	Depths (ft)	Injection or Confining Units	Tops	Completion/Operation Details:
Adjacent Unit: Litho. Struc. Por.		<u>DU</u>	<u>15650</u>	Drilled TD <u>16900</u> PBSD _____
Confining Unit: Litho. Struc. Por.				NEW TD _____ NEW PBSD _____
Proposed Inj Interval TOP:			<u>15500</u>	NEW Open Hole <input checked="" type="checkbox"/> or NEW Perfs <input type="checkbox"/>
Proposed Inj Interval BOTTOM:			<u>16900</u>	Tubing Size <u>4 1/2</u> in. Inter Coated? <u>Y</u>
Confining Unit: Litho. Struc. Por.				Proposed Packer Depth <u>15450</u> ft
Adjacent Unit: Litho. Struc. Por.				Min. Packer Depth <u>15450</u> (100-ft limit)
				Proposed Max. Surface Press. <u>3100</u> psi
				Admin. Inj. Press. <u>3100</u> (0.2 psi per ft)

AOR: Hydrologic and Geologic Information

POTASH: R-111-P N/A Noticed? _____ BLM Sec Ord WIPP Noticed? _____ Salt/Salado T: 800 NW: Cliff House fm N/A

FRESH WATER: Aquifer Quaternary Max Depth _____ HYDRO AFFIRM STATEMENT By Qualified Person

NMOSE Basin: CARLSBAD CAPITAN REEF: thru adj NA No. Wells within 1-Mile Radius? 1 FW Analysis Y

Disposal Fluid: Formation Source(s) Bonespring Analysis? X On Lease Operator Only or Commercial

Disposal Int: Inject Rate (Avg/Max BWPD): 100/25K Protectable Waters? MA Source: _____ System: Closed or Open

HC Potential: Producing Interval? N/A Formerly Producing? _____ Method: Logs/DST/P&A/Other regional 2-Mile Radius Pool Map

AOR Wells: 1/2-M Radius Map? _____ Well List? _____ Total No. Wells Penetrating Interval: _____ Horizontals? _____

Penetrating Wells: No. Active Wells 0 Num Repairs? _____ on which well(s)? _____ Diagrams? _____

Penetrating Wells: No. P&A Wells 0 Num Repairs? _____ on which well(s)? _____ Diagrams? _____

NOTICE: Newspaper Date 12-2017 Mineral Owner NMSCO Surface Owner NMSCO N. Date 1-3-2017

RULE 26.7(A): Identified Tracts? _____ Affected Persons: CARBON, COG, RKT, CHEVRON N. Date 1-9-2017

Order Conditions: Issues: _____

Add Order Cond: N4W C-B-L 7" / 15450' - 400'



New Mexico Office of the State Engineer Water Column/Average Depth to Water

(quarters are 1=NW 2=NE 3=SW 4=SE)
(quarters are smallest to largest) (NAD83 UTM in meters)

No records found.

PLSS Search:

Section(s): 1-3, 10-12

Township: 26S

Range: 29E

The data is furnished by the NMOSE/ISC and is accepted by the recipient with the expressed understanding that the OSE/ISC make no warranties, expressed or implied, concerning the accuracy, completeness, reliability, usability, or suitability for any particular purpose of the data.

1/27/17 9:46 AM

WATER COLUMN/ AVERAGE
DEPTH TO WATER



New Mexico Office of the State Engineer Water Column/Average Depth to Water

(quarters are 1=NW 2=NE 3=SW 4=SE)
(quarters are smallest to largest) (NAD83 UTM in meters)

No records found.

PLSS Search:

Section(s): 34-36

Township: 25S

Range: 29E

The data is furnished by the NMOSE/ISC and is accepted by the recipient with the expressed understanding that the OSE/ISC make no warranties, expressed or implied, concerning the accuracy, completeness, reliability, usability, or suitability for any particular purpose of the data.

1/27/17 9:47 AM

WATER COLUMN/ AVERAGE
DEPTH TO WATER